| | | | | | | | Application or Docket Number | | | |] |
|--|----------------|--------------------|--------------|------------------|-----------|----------------|------------------------------|------|------------|----------------|---|
| PATENT APPLICATION FEE DETERMINATION RECOR Effective January 1, 2003 | | | | | | 040894-5854 | | | | | |
| CLAIMS A | S FILED - | PART | | | OME | <u> </u> | -1/7 | 08 | | 7 | 1 |
| TOTAL CLAIMS | (Column | 11) | (Coh | amn 2) | SMAL | | | OR | | THAN ENTITY | |
| 20 | | | | | RA | TE | FEE |] | RATE | FEE | 1 |
| FOR | NUMBER FILED | | NUMBER EXTRA | | BASI | FEE | 375.00 | OR | BASIC FEE | 750.00 | 1 |
| TOTAL CHARGEABLE CLAIMS | 20 - minus 20= | | 6 | | XS | 9-a | | OR | X\$18= | | 1 |
| NDEPENDENT CLAIMS | = E sunim_ A6 | | 1 | | X4: | X42= | | OR | X84a | Ora | 1 |
| MULTIPLE DEPENDENT CLAIM F | RESENT | | | | | | | | | 84. | P |
| If the difference in column 1 is | less than ze | era, enter | Tine | octumn 2 | +14 | | | OR | +280= | | |
| LA CLAIMS AS | | | | | TOT | ~ | <u> </u> | OR | TOTAL | ध्रक्र | 1 |
| (Column 1) | MHEIADED. | (Colum | | (Column 3) | SMA | LLE | YTTTY | OR | SMALL | | |
| CLAIMS REMAINING | | RIGHE | ST | PRESENT | | | ADDI- | | | ADDI- | ł |
| AFTER AMENDMENT | | PREVIO | USLY | EXTRA | RAT | E | TIONAL | | RATE | TIONAL | |
| Total . 22 | Minus | - 4 | 0 | .2 | RE | 爿 | FEE | | 350 | 15 | |
| REMAINING AFTER AMENDMENT Total • 22 Independent • U | Mirrus | | 7 | -0 | 100 | | | OR | XXT8= | /ω | |
| FIRST PRESENTATION OF M | | PENDENT | CLARM | - | X42 | - | | OR | X84= | | |
| | | | | لللب | +140 |) - | | OR | +280= | | |
| 1 1 | | | | | | TAL | | | YOYAL | ,60 | e |
| 119/05 (Column 1) | | (Colum | n 2) | (Column 3) | ADDIT. | ÆŁ | · | | ADDIT. FEE | 700 | |
| CLAIMS REMAINING | | HIGHE | ST | PRESENT | | 7 | ADDI- | | | ADDI- | |
| AFTER AMENDMENT | | PREVIOU PAID F | USLY | EXTRA | RAT | E | TIONAL | | RATE | TIONAL | |
| REMAINING AFTER AMENDMENT Total • 23 Independent • 4 | Minus | - 79 | On . | -/- | V | \dashv | FEE | | **** | _FEE_ | |
| Independent . | Minus | | | - | X\$ 9 | - | | OR | X\$18= | | |
| FIRST PRESENTATION OF MA | ILTIPLE DEP | ENDENT | MIAS | - | X42 | | | OR | X84= | | |
| | | | | | +140 | •• | | OR | +280= | | |
| 124/06 (Column 1) | | | | | ADDIT. | | | OR | TOTAL | | |
| 24 (Column 1) | | (Colum | 1 21 | (Column 3) | AUCH I. P | te L | | | NOOT. FEE | | |
| CLAIMS REMAINING | | HIGHE | 37 | | | 1 | ADDI- | ı | | ADDI- | |
| AFTER | | PREVIOU PAID FO | ISLY | PRESENT EXTRA | RATE | | TONAL | | RATE | TIONAL | |
| Total . 2 Z Independent . 4 | Minus | 2 | 2 | . / | 1 | + | FEE | ł | | FEE | |
| Independent • | Minus | | 7 | | X\$ 9 | 4 | | OR | X\$18= | | |
| FIRST PRESENTATION OF MIL | | | MIAK | 8 17 | X42= | | | OR | X84= | | |
| | | | | | +140 | . [| | OR | +280= | | |
| * If the entry in column 1 is test than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20," | | | | | 101 | | | | TOTAL | -/ | |
| | | | | 30, enter "30." | ADDIT. FI | | | OR . | DOIT, FEE | | |